

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.:	SC12505TP
	First Inventor:	Michael Sadd et al.
	Title:	MULTI-BIT NON-VOLATILE MEMORY DEVICE AND METHOD THEREFOR
	Express Mail Label No.:	EV322115290US

013004
5/10/769228

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, D.C. 20231																																
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages 26 (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets 6</p> <p>5. Oath or Declaration <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p> <p>18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) Prior Appl. No. 10/393,065 Prior Appl. information: Examiner: Chandra P. Chaudhari Group/Art Unit: 2813 </p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p> <p>19. CORRESPONDENCE ADDRESS</p> <table border="1"> <tr> <td><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td> <td>23125</td> <td>or</td> <td><input type="checkbox"/> Correspondence address below</td> </tr> <tr> <td>Name</td> <td colspan="3">Daniel D. Hill</td> </tr> <tr> <td>Address</td> <td colspan="3">Motorola, Inc. - Law Department 7700 W. Parmer Lane, MD: TX32/PL02</td> </tr> <tr> <td>City</td> <td>Austin</td> <td>State</td> <td>Texas</td> </tr> <tr> <td>Country</td> <td>U.S.A.</td> <td>Telephone</td> <td>(512) 996-6839</td> </tr> <tr> <td>Name</td> <td colspan="2">Daniel D. Hill</td> <td>Registration No. 35,895</td> </tr> <tr> <td>SIGNATURE</td> <td colspan="3">Daniel D. Hill</td> </tr> <tr> <td>Date</td> <td colspan="3">1 - 30 - 04</td> </tr> </table>			<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23125	or	<input type="checkbox"/> Correspondence address below	Name	Daniel D. Hill			Address	Motorola, Inc. - Law Department 7700 W. Parmer Lane, MD: TX32/PL02			City	Austin	State	Texas	Country	U.S.A.	Telephone	(512) 996-6839	Name	Daniel D. Hill		Registration No. 35,895	SIGNATURE	Daniel D. Hill			Date	1 - 30 - 04		
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**FEE
TRANSMITTAL**

Patent fees are subject to annual revision

<i>Complete if Known</i>	
Application Number	10/393,065
Filing Date	March 20, 2003
First Named Inventor	Michael Sadd
Examiner Name	Chandra P. Chaudhari
Group Art Unit	2813

TOTAL AMOUNT OF PAYMENT

(\$) 770

Attorney Docket No.

SC12505TP

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number

502117

Deposit Account Name

Motorola, Inc.

Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity			
Fee Code	(\\$)	Fee Code	(\\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
1812	2520	1812	2520	For filing a request for ex parte Reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	410	2252	205	Extension for reply within second month
1253	930	2253	465	Extension for reply within third month
1254	1450	2254	725	Extension for reply within fourth month
1255	1970	2255	985	Extension for reply within fifth month
1401	320	2401	160	Notice of Appeal
1402	320	2402	160	Filing a brief in support of an appeal
1403	280	2403	140	Request for oral hearing
1451	1510	1451	1510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1300	2453	650	Petition to revive - unintentional
1501	1300	2501	650	Utility issue fee (or reissue)
1502	470	2502	235	Design issue fee
1503	630	2503	315	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))
1801	750	2801	375	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application
Other fee (specify) _____				

SUBTOTAL (1) **(\$)** 770

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Previously Paid**		Extra Claims	Fee from below	Fee Paid		
		6	1	20	=	18	=	0
					X	84	=	0
								280 =

Multiple Dependent

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Entity Fee (\$)	Fee Description
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9

*Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$)** 0

**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.

*For Reissues, see above

* Reduced by Basic Filing Fee paid

SUBTOTAL (3) **(\$)**

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Daniel D. Hill	Registration No.	35,895	Telephone	(512) 996-6839
Signature	<i>Daniel D. Hill</i>		Date	1-30-04	

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